



Financial Scholarship Application

2020-2021

All questions must be answered. If not applicable, please enter zero.

Student(s)' Name(s) _____ Date _____

Parent(s)' Name(s) _____ Phone _____

Address _____ City _____ Zip _____

Grade student(s) will be entering fall 2020 _____

HOUSEHOLD INFORMATION:

Note: Complete the following questions using data pertaining to parent(s) completing the form. If parents are divorced, enter data for the parent with whom this dependent lives for the greater part of the year. If that parent is remarried, include data for stepparent. Depending on individual circumstances, all or part of the information requested below will be used in determining aid.

Household size: (Include dependents claimed on parent's income tax return.) _____

Number of children attending SMV _____ Other schools _____

Parent(s) Marital Status _____ (Married, Single, Divorced, Widowed)

Estimated monthly household expenses \$ _____

Elementary and secondary school tuition paid in 2019-20 \$ _____

Number of family members who will be enrolled in college at least halftime in 2020-21 _____

Parent(s)' projected income for 2020 \$ _____

Do you expect to receive financial aid from any other source? _____ If yes, how much? _____

Please estimate the amount of financial assistance you hope to receive. _____

Please include a copy of first page only of 2019 Form 1040, filed for income tax purposes. Forms will not be processed without tax information.

Parent's Signature _____ Date _____

- Parent completing this form must be legally responsible for the student(s) named and thus, financially responsible for the student(s)' educational costs.
- Please be aware that if at any time this/these student(s)' accounts are not kept current according to the agreed upon payment plan, any financial aid offered may be discontinued.
- On the back of this sheet, please explain any special circumstances relating to any answer.

This form cannot be processed until the school has received your completed registration packet and registration fee.

PLEASE RETURN USING THE ATTACHED CONFIDENTIAL ENVELOPE, or A PLAIN ENVELOPE TO THE ATTENTION OF MRS. SCHLOSSER, She will be in contact with you.

Special Circumstances
